

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF PENNSYLVANIA

Chofarrah Clemons
PO Box 16831
Mobile AL 36616
(In the space above enter the full name(s) of the plaintiff(s).)

- against -

Alan Cohen
Daniel Morgney
Department of Homeland Security
Department of Federal Bureau Investigation
National Security Agency

COMPLAINT

Jury Trial: ☐ Yes ☒ No
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Street Address

County, City

State & Zip Code

Telephone Number

Chofarrah Clemons

Not located

251-288-7572

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name Alan Cohen
 Street Address 1300 Lombard Street #1406
 County, City Philadelphia PA
 State & Zip Code 19147

Defendant No. 2

Name Daniel Moroney
 Street Address 401 N 21st Street
 County, City Philadelphia PA 19130
 State & Zip Code _____

Defendant No. 3

Name Department of Federal Bureau of Investigation
 Street Address 600 Arch Street
 County, City Philadelphia PA 19106
 State & Zip Code _____

Defendant No. 4

Name National Security Agency
 Street Address _____
 County, City _____
 State & Zip Code _____

II. Basis for Jurisdiction:

#5 Department of Homeland Security
701 Market Street Philadelphia PA 19106

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

- A. What is the basis for federal court jurisdiction? (check all that apply)

☐ Federal Questions

☒ Diversity of Citizenship

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue?

Violation of the fourth Amendment
and first Amendment, Illegal Search and Seizure
of private property to cause harm.

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship

Defendant(s) state(s) of citizenship

~~Alabama~~ Alabama Mobile - Philadelphia
Philadelphia, PA - Mobile Alabama

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur?

Philadelphia PA, Mobile AL

B. What date and approximate time did the events giving rise to your claim(s) occur?

Philadelphia PA
November 2, 2015-2017 - Mobile AL - 5/2017 -
Current, July 2021

C. Facts:

What
happened
to you?

Who did
what?

Was
anyone
else
involved?

Who else
saw what
happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

memory issue Confusion, of the time. Anxiety and emotional disorders Currently

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

I'm asking to be fully compensate and made whole, for material value lost Career advancement deprive Character assassination by defamations of Character, trauma of all attack, I am ask for 300,000,000.00 Three Hundred Million.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 23 day of July, 2021.

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

E-mail Address

Chofand Clemans
PO Box 16831
Mobile AL 36616

251-288-7572

thomas33ccc@gmail.com

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this _____ day of _____, 20____, I am delivering this complaint to prison authorities to be mailed to the Clerk's Office of the United States District Court for the Eastern District of Pennsylvania.

Signature of Plaintiff: _____

Inmate Number _____

USDC-EDPA
REC'D CLERK

2021 JUL 23 P 1:54

Chadareh Clemens
po box 16831 mobile AL 36616